



# LOBBYIST TERMINATION FORM

OFFICE OF THE CITY CLERK LICENSE DIVISION

200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202

(414) 286-2238

E-MAIL ADDRESS: [LICENSE@MILWAUKEE.GOV](mailto:LICENSE@MILWAUKEE.GOV)

<http://city.milwaukee.gov/lobbying>

Regulations located in Chapter 305 of the Milwaukee Code of Ordinances.

\_\_\_\_\_ (Lobbyist Name)

has been terminated as a lobbyist for

\_\_\_\_\_ (Principal Name)

**I certify that the above lobbyist's engagement or employment for the above principal has been terminated. I further certify that I am authorized to sign this document on behalf of the principal.\***

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**The termination is effective upon receipt of this signed form by the City Clerk License Division. Please submit in person or by mail. No faxed or copied forms will be accepted.**

**\*Only the original signature of those individuals listed as authorized to sign documents on behalf of the principal will be accepted.**

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Office Use Only:

Initials: \_\_\_\_\_ Transaction #: \_\_\_\_\_ Date & Time Stamp: